

**NEVADA FINANCIAL DISCLOSURE STATEMENT**  
(Attach additional sheets if necessary.)

**FILE**

JAN 12 2006

DEAN HELLER  
SECRETARY OF STATE

1535

NAME THALIA M. DONDERO  
MAILING ADDRESS 2931 Pinehurst  
CITY, STATE, ZIP Las Vegas NV 89109  
TELEPHONE 702-735-8203

LENGTH OF RESIDENCE IN NEVADA 62 years  
LENGTH OF RESIDENCE IN DISTRICT WHERE REGISTERED TO VOTE [per NRS 281.571(1)(a)] 18  
E-MAIL tdondero@nevada.edu  
and chaynes@nevada.edu

List all public offices for which this financial disclosure statement is required [NRS 281.571, Subsection 1(g)]:

Public Office	Elected (E) or Appointed (A)	Annual Compensation	Term or Date Appointed	ANNUAL all elected and appointed public officers (no later than Jan. 15 each year) NRS 281.559(1)(b) 281.561(1)(b)	CANDIDATE (no later than the 10 <sup>th</sup> day after the last day to qualify as a candidate) NRS 281.561(1)(a)	APPOINTMENT to fill unexpired term of an elected or appointed public officer (within 30 days) NRS 281.559(1)(a)
<u>NSHE - Regent</u>	<u>E</u>	<u>\$00<sup>00</sup></u>	<u>2002</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>see attached for</u>		<u>per meeting</u>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>total 2005 Compensation →</u>		<u>\$720<sup>00</sup></u>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

List all general sources of income for you and members of your household over 18 years of age [NRS 281.571, Subsection 1(b)]:

List all general sources of income for you and members of your household over 18 years of age [NRS 281.571, Subsection 1(b)]:			Self	Household Member
	Brown-Forman Liberty-us government Wachovia Securities Federated world class Inv.	National Financial		
Dividends		1,619.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Business income		9,169.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Pension - annuities		84,868.00	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

List each creditor to whom you or a member of your household owes \$5,000 or more [except (1) debt secured by mortgage or deed of trust on real property which is not required to be listed below, and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281.571, Subsection 1(d)]:

	Self	Household Member
Property -	<input checked="" type="checkbox"/>	<input type="checkbox"/>
87,477.41	<input checked="" type="checkbox"/>	<input type="checkbox"/>
109,880.64	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

List each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity [NRS 281.571, Subsection 1(f)]:

	Self	Household Member
Mary Dean Martin Associate	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Summerlin Hospital Board member	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

List specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state [NRS 281.571, Subsection 1(c)]:

Specific Location	Particular Use
Mt Charleston Cabin 173 Chalet	Summer Cabin

List the identity of donor and value of each gift received in excess of an aggregate value of \$200 from a donor during the preceding taxable year [except (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, or political action] [NRS 281.571, Subsection 1(e)]:

Donor	Value of Gift
only fruit and floral baskets	\$
an occasional dinner or lunch	\$
Nothing received over \$200.00	\$
	\$
	\$

THE INFORMATION I HAVE PROVIDED HEREIN IS ACCURATE AND COMPLETE.

Date: Jan 04, 2006 Signature: Julia M. Anderson

2006	349117CEO	2005-08-31	DONDERO, THALIA	MEETING	80
2006	351729CEO	2005-10-05	DONDERO, THALIA	MEETING	160
2006	351637CEO	2005-10-05	DONDERO, THALIA	MEETING	80
2006	352316CEO	2005-10-14	DONDERO, THALIA	MEETING	80
2006	353557CEO	2005-11-10	DONDERO, THALIA	B/R WORKSHOP	160
2006	354738CEO	2005-11-28	DONDERO, THALIA	ORIENTATION MTG	80
2006	354802CEO	2005-12-02	DONDERO, THALIA	MEETING ATTENDANCE	80
<b>Total</b>					<b>\$720.00</b>